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(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application No.	09/409,627
Filing Date	September 30, 1999
First Named Inventor	Eric K. Mann
Art Unit	2153
Examiner Name	Kevin S. Parton
Attorney Docket Number	42390P7092

	ENCLO	SURES (check a	all that apply)				
Fee Transmittal	Form	Drawing(s)			After Allowance Communication to Group		
Fee Attac	ched	Licensing-related Papers			Appeal Communication to Board of Appeals and Interferences		
Amendment / R	esponse	Petition			Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)		
After Fina Affidavits.	al /declaration(s)	Petition to Co Provisional Ap	nvert a oplication		Proprietary Information		
Extension of Tin	ne Request	Power of Atto Change of Co	rney, Revocation rrespondence Addres	ss 🗆	Status Letter		
Express Abando	onment Request	Terminal Disclaimer			Other Enclosure(s) (please identify below):		
	closure Statement	Request for Refund			- Check for \$420.00 - Return Receipt Postcard		
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Decla	aration/POA				·		
Response Parts und 1.52 or 1.	e to Missing Ier 37 CFR 53	Technology Center					
	SIGNATUR	E OF APPLICANT	, ATTORNEY, OR A	AGENT			
Firm	Paul A. Mendo	nsa, Reg. No. 42	,879				
or Individual name BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP							
Signature J. J. J.							
Date August 25, 2004							
	CERTIF	ICATE OF MAILIN	G/TRANSMISSION	Į			
	irst class mail in an en				e on the date shown below with nissioner for Patents, P.O. Box		
Typed or printed na	me Deborah L.	Higham					
Signature	20HD			Date	August 25, 2004		

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Effective 10/01/2004 Patent fees are subject to annual revision	First No

Applicant claims small entity status. See 37 CFR 1.27.

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TOTAL AMOUNT OF PAYMENT

) C	omplete if Known	
	Application Number	09/409,627	
	Filing Date	September 30, 1999	
	First Named Inventor	Eric K. Mann	
7.	Examiner Name	Kevin S. Parton	
-	Art Unit	2153	
420.00	Attorney Docket No.	42390P7092	

METHOD OF PAYMENT (check all that apply)				FE	E CALCULATIO	N (continue	ed)	
	2 ADDITIONAL FEES							
☐ Check ☐ Credit card ☐ Money ☐ Other ☐ None								
Deposit Account	I ——	Entity	-	II Entity	<u>-</u>			
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The Commissioner is authorized to: (check all that apply)	1812	2,520	1812	2,520	For filing a request for e	•	ation	
☐ Charge fee(s) indicated below ☐ Credit any overpayments	1804	920*	1804	920 *	 Requesting publication Examiner action 	of SIR prior to		
Charge any additional fee(s) or underpayment of fees as required under 37	1805	1,840*	1805	1,840	Requesting publication	of SIR after		
CFR §§ 1.16, 1.17, 1.18 and 1.20. Charge fee(s) indicated below, except for the filling fee	1803	1,040	1000	1,040	Examiner action	J. On Caller		
to the above-identified deposit account	1251	110	2251	55	Extension for reply with	in first month		
FEE CALCULATION	1252	420	2252	210	Extension for reply with	in second month		420.00
1. BASIC FILING FEE	1253	950	2253	475	Extension for reply with	in third month		
Large Entity Small Entity	1254	1,480	2254	740	Extension for reply with	in fourth month		
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Code (\$) Code (\$)	1404	330	2401	165	Notice of Appeal			····
1001 770 2001 385 Utility filing fee	1402	330	2402	165	Filing a brief in support	of an appeal		
1002 340 2002 170 Design filing fee	1403	290	2403	145	Request for oral hearing			
1003 530 2003 265 Plant filing fee	1451	1,510	2451	1,510	Petition to institute a pr	_	ina	<u> </u>
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2. EXTRA CLAIM FEES Extra Fee from Claims below Fee Paid	1503	640	2503	320	Plant issue fee		SEP 02	2004
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1202 18 2202 9 Claims in excess of 20			.500		(37 ČFR § 1.129(a))			
1201 86 2201 43 Independent claims in excess of 3	1810	770	2810	385	For each additional inve			
1203 290 2203 145 Multiple Dependent claim, if not paid					examined (37 CFR § 1.		E)	
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**or number previously paid, if greater, For Reissues, see below	<u> </u>							0.00
SUBMITTED BY						Comp	lete (if applica	
Name (Print/Type) Paul A. Mendonsa	Registration No. (Attorney/Agent) 42,879 Telephone (503) 439-87					-8778		
Signature Fund All molona						Date	08/25	/04